

MI-1040 Michigan Income Tax Return

1997

Issued under P.A. 281 of 1967. Filing is mandatory.

PART 1: IDENTIFICATION

PLACE LABEL HERE	▶ 1 Filer's First Name, Middle Initial and Last Name			▶ 2 Filer's Social Security Number		
	If a Joint Return, Spouse's First Name, Middle Initial and Last Name			▶ 3 Spouse's Social Security Number		
	Home Address (No., Street, P.O. Box or Rural Route)			Office Use		
	City or Town	State	ZIP Code	▶ 4 School District Code (see inst. p. 41)		

▶ **5 STATE CAMPAIGN FUND** Do you or your spouse, if filing a joint return, want \$3 of your taxes to go to this fund? This will not increase your tax or reduce your refund. ▶ **5** a. You YES ☐ NO ☐ b. Spouse YES ☐ NO ☐

▶ **6** ☐ If 2/3 of your income is from farming, fishing or seafaring, check this box.

▶ **7 FILING STATUS**

a. ☐ Single

b. ☐ Married, filing jointly

c. ☐ Married, filing separately. Complete item 3 and enter your spouse's name here:

▶ **8 RESIDENCY**

a. ☐ Resident b. ☐ Nonresident

c. ☐ Part-Year Resident

If you check box "b" or "c," you must complete and attach Schedule NR.

▶ **9 EXEMPTIONS** (see p. 6)

How many exemptions did you claim on your federal return?..... ▶ **9a** _____ x \$2,500 = 9b \$ _____ .00

Check a box for all Michigan special exemptions that apply

Age 65 or older.....	▶ c <input type="checkbox"/>	You	Spouse	
Deaf.....	▶ e <input type="checkbox"/>			▶ d <input type="checkbox"/>
Totally and permanently disabled (and under age 65), hemiplegic, paraplegic, quadriplegic or blind	▶ g <input type="checkbox"/>			▶ f <input type="checkbox"/>
Unemployment compensation (must be 50% of AGI).....				▶ h <input type="checkbox"/>
How many boxes did you check?..... 9j _____ x \$900 = 9k \$ _____ .00				
If your parents (or someone else) can claim you as a dependent on their tax return, check the box and complete the worksheet on the back.				
		You	Spouse	
		▶ 9L <input type="checkbox"/>	▶ 9m <input type="checkbox"/>	9n. \$ _____ .00
Add lines 9b, 9k and 9n. Enter here and on line 15..... 9. \$ _____ .00				

PART 2: TAX COMPUTATION

STAPLE STATE COPY OF W-2 HERE	10. Adjusted gross income from your U.S. 1040, 1040A or 1040EZ (see p. 6).....		▶ 10. _____ .00
	11. Additions (from line 45 on the back of this form).....		▶ 11. _____ .00
	12. Total. Add lines 10 and 11.....		12. _____ .00
	13. Subtractions (from line 56 on the back of this form).....		▶ 13. _____ .00
	14. Income subject to tax. Subtract line 13 from line 12.....		14. _____ .00
	15. Exemption Allowance. Enter the amount from line 9 or Schedule NR, line 19.....		▶ 15. _____ .00
	16. Taxable income. Subtract line 15 from line 14. If line 15 is more than line 14, enter "0".....		16. _____ .00
	17. Tax. Multiply line 16 by 4.4% (.044).....		17. _____ .00

	AMOUNT	CREDIT
18. Income tax paid to Michigan cities (see p. 7).....	▶ 18a. _____ .00	18b. _____ .00
19. Public Contributions (see p. 7).....	▶ 19a. _____ .00	19b. _____ .00
20. Community Foundations. Enter code from p. 19 <input type="text"/>	▶ 20a. _____ .00	20b. _____ .00
21. Homeless /Food Bank Cash Contributions (see p. 7).....	▶ 21a. _____ .00	21b. _____ .00
22. Income tax paid to another state. Attach a copy of the return.....	22a. _____ .00	▶ 22b. _____ .00
23. College Tuition and Fees Credit (attach Schedule CT).....		▶ 23. _____ .00
24. Total nonrefundable credits. Add lines 18b, 19b, 20b, 21b, 22b, and 23.....		24. _____ .00
25. Income tax. Subtract line 24 from line 17. If line 24 is greater than line 17, enter "0".....		▶ 25. _____ .00

Voluntary Contributions (see page 8)

CTF LOGO

Fight Child Abuse

▶ **26.** ☐ \$10 or _____ .00 +

Help Endangered and Nongame Wildlife

▶ **27.** ☐ \$10 or _____ .00

= 28. _____ .00

29. _____ .00

29. Add lines 25 and 28.....

30. Property Tax Credit. Attach MI-1040CR or MI-1040CR-2..... ▶ **30.** _____ .00

31. Farmland Preservation Credit. Attach MI-1040CR-5..... ▶ **31.** _____ .00

32. MICHIGAN TAX WITHHELD. ATTACH STATE COPY OF W-2..... ▶ **32.** _____ .00 ◀

33. Estimated tax, extension payments and 1996 credit forward..... ▶ **33.** _____ .00

34. Add lines 30 through 33..... 34. _____ .00

35. If line 34 is less than line 29, enter TAX DUE. Check if **MI-2210** is attached ▶ **a.** ☐

Include interest _____ and penalty _____ if applicable (see p. 8)

Enter amount due on line 35..... ▶ Pay ▶ **35.** _____ .00

36. If line 34 is greater than line 29, subtract line 29 from line 34. You overpaid this amount..... 36. _____ .00

37. Amount of line 36 to be credited to your 1998 estimated tax..... ▶ **37.** _____ .00

38. Subtract line 37 from line 36. *For a Fast Refund File Electronically.* Refund ▶ **38.** _____ .00

Check this box if someone else prepares your return and you DO NOT need a book mailed to you next year (see p. 2).



PART 3:
ADDITIONS

39. Gross interest and dividends from obligations issued by states other than Michigan or their political subdivisions.....	39.	.00
40. Gains from Michigan MI-1040D and MI-4797.....	40.	.00
41. Losses attributable to other states (see p. 9)	41.	.00
42. Net loss from federal column of your Michigan MI-1040D or MI-4797	42.	.00
43. Deduction for taxes on or measured by income including self-employment tax taken on your federal return (see p. 9)	43.	.00
44. Other (see p. 9). Describe:	44.	.00
45. Total additions. Add lines 39 through 44. Enter here and on page 1, line 11.....	45.	.00

PART 4:
SUBTRACTIONS

46. Income from U.S. government bonds and other U.S. obligations included in line 10.....	46.	.00
47. Military pay from U.S. Armed Forces included in line 10 (attach W-2). Include retirement pay on line 50.....	47.	.00
48. Gains from federal column of Michigan MI-1040D and MI-4797.....	48.	.00
49. Income attributable to another state. Explain type and source:.....	49.	.00
50. Retirement or pension benefits included in line 10. Include military retirement here See exceptions, page 9. Name of payer:	50.	.00
51. Dividend/interest/capital gains deduction for senior citizens reduced by pension subtraction (see p. 10).....	51.	.00
52. Social Security benefits from U.S. 1040, line 20b or U.S. 1040A, line 13b.....	52.	.00
53. Income earned while a resident of a renaissance zone. Name of zone:	53.	.00
54. Michigan state and local income tax refunds received in 1997 that are included in line 10.....	54.	.00
55. Miscellaneous subtractions (see p. 10). Describe:	55.	.00
56. Total subtractions. Add lines 46 through 55. Enter here and on page 1, line 13.....	56.	.00

Worksheet for Filers Eligible to be Claimed as a Dependent on Someone Else's Return (for line 9n)

Is your adjusted gross income (the amount on line 10) over \$1,500 if single, or over \$3,000 if married filing jointly?

- | | |
|--|---|
| <input type="checkbox"/> YES. If single, enter "0" on line 9a and \$1,000 on line 9n.

<input type="checkbox"/> YES. If married and both you and your spouse can be claimed as dependents, enter "0" on line 9a and \$2,000 on line 9n.

<input type="checkbox"/> YES. If married and only one of you can be claimed as a dependent, enter "1" on line 9a, \$2,500 on line 9b, and \$1,000 on line 9n. | <input type="checkbox"/> NO, then was Michigan income tax withheld from your wages?

<input type="checkbox"/> YES. Enter "0" on lines 9 and 25, and complete line 10 and lines 26 through 38 of this form.

<input type="checkbox"/> NO. You do not need to file this return. |
|--|---|

MAILING
INSTRUCTIONS**Refund or Credit:**

Mail your return to:

**Michigan Department of Treasury
Lansing, MI 48956**

To have your refund deposited directly into your bank account, complete the *Direct Deposit of Refund* form on page 29 and attach it behind your MI-1040. See "Attachments" instructions on page 19.

Pay:

Mail your return to:

**Michigan Department of Treasury
Lansing, MI 48929**

Make checks payable to "State of Michigan." Write your Social Security number and the words "1997 income tax" on the front of your check. Do not staple your check to the return.

SIGN HERE

I declare, under penalty of perjury, that the information in this return and attachments is true and complete to the best of my knowledge.

- | | |
|--|---|
| <input type="checkbox"/> I authorize Treasury to discuss my return and attachments with my preparer. | <input type="checkbox"/> Do not discuss my return with my preparer. |
|--|---|

Filer's Signature

Date

Spouse's Signature

Date

I declare, under penalty of perjury, that this return is based on all information of which I have knowledge.

Preparer's Signature, Address, Phone and ID No.

This return is due April 15, 1998, or on the 15th day of the fourth month after your tax year ends.
Your return may be audited. Keep a copy of this form and all supporting documents for six years.